File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Molnes, lowa 60319 Fax: 515-281-4073



IA ETHICS AND CAMPAIGN DISCLOSURE BD.

| 510 E. 12", Ste. 1A<br>Des Molnes, Iowa 50319<br>Fax: 515-281-4073 | FOR INSTRUCTIONS DISCLOSURE S  | S, SEE BACK OF FORM<br>SUMMARY PAGE        |                      | 2008 OCT 30 AM 10: 2                                      |
|--|--|--|----------------------|---|
| COMMITTEE NAME (Must be  | same as on Statement of Organia  |  |                      |   |
| Committee to Elect Joe Sko   | W  | addorry .                                  |                      | FORM  |
| (4) County Central Committee (5                                    | of committee you are reporting for: 5 tanding for Retention Candidate (2) County Candidate (6) City Candidate (PAC (9) City PAC (10) School Boat | State PAC (3)State Party                   | ical<br>AC (         | DR-2 (Rev. 07/2007) DISCLOSURE REPORT For Office Use Only |
| CANDIDATE COMMITTEES (<br>Candidate Name<br>Joe Skow               | ONLY:  | Political Party (if applicable) Republican | )                    | Comm. # Logged in Scanned                                 |
| Office Sought<br>Clay County Supervisor                            |  | District (if Senate or House)              | ,                    | Computer  |
| SIGNATURE OF PERSON FILE   |  | 712-260-8441<br>TELEPHONE                  |                      | 10-30 - 08<br>DATE SIGNED                                 |
| AM FILING A 10-19-   | 08   | REPORT FOR (1) ELECTIO                     | N /(2)NOI            | N-ELECTION YEAR.  |
| (rep   | ort date)  | Indicate b                                 | y# 🚺                 |   |
| CHECK IF AMENDMENT TO  | REPORT DATED   |  | Local Co             | ommittees, enter Date of Election                         |
| Check if this is final (terminat<br>(You must continue to          | ion) report and attach Notice of Di<br>file reports until a DR-3 is filed.)  | ssolution Form DR-3.                       | County 8<br>which El | R. Local Committees, enter County in<br>lection is held   |
| CASH ON HAND at the beginning committee. This amou                 | NT OF CASH ON HAND  ng of the reporting period. (Total of  nt MUST be the same as the cash  riod or must be zero if this is first n              | on hand at the end                         |                      | 270,99  |
|  | TAKEN IN THIS PERIOD   | eport med./                                | ··········· 4        | 8.0,11  |
|  | ntributions total (Attach Schedule /   | A) (*aiso see in-kind below)               |                      | 50.00   |
|  | ceived total (Attach Schedule F)   |  |                      |   |
|  | es of Campaign Property (Attach 8  |  |                      |   |
|  | applies to Candidates' Committe  |  |                      |   |
|  | ·  | SUB-TOTAL.                                 | \$                   |   |
| SUBTRACT TOTAL M   | ONEY SPENT THIS PERIOD   |  | ·                    |   |
| Schedule B: Expenditu  | ires total (Attach Schedule B) (**a  | iso see debts and loans below              | )                    | 138.24  |
|  | ayments total (Attach Schedule F)  |  |                      |   |
| CASH ON HAND at the end of the                                     | nis reporting period (if final report t  | palance must be zero)                      | \$                   | 1682,79   |
| *UNPAID BILLS (From Schedu   | le D - Attach Schedule D)  |  | \$                   |   |
|  | om Schedule E - Attach Schedule  |  |                      |   |
|  | n Schedule F - Attach Schedule F)  |  |                      |   |
| ONSULTANT BREAKDOWN (  |  |  | Ф                    | YES NO  |
| ANDIDATE COMMITTEES ON   | •  |  |                      |   |
|  | <br>RTY (From Schedule H - Attach S  | chedule H)                                 | \$                   |   |
|  | a reconciled campaign account be   | · · · · · · · · · · · · · · · · · · ·      | •                    |   |

| For Instruct                   | ions, See Back of   | Form r  |                                       | 001 IED                     | <del>-</del>       |                                       |
|--------------------------------|---|---|---------------------------------------|-----------------------------|--------------------|---------------------------------------|
| CONTRIBUT                      | FIONS MONEY TA<br>ding candidate's personal f               | AKEN IN   | Ceset Form                            | SCHEDUL<br>A<br>(Rev. 07/03 | MONE               | TARY<br>EIPTS                         |
| COMMITTEE                      | NAME (Must be same  | e as on Statement of Organization)  | Ī                                     |                             | HECK THIS          |                                       |
|                                | o Elect Joe Skow  | or organization)  |                                       | AM                          | MENDING FO         | ORM                                   |
| NOTE: ANY PEI                  | IARU.<br>RSON, OTHER THAN AI                                | RIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE OF THE MORE THAN \$750 EDIATELY CONTACT THE BOARD. | WINDLE FROM THE                       | IVWA ETAIC                  | S AND CAMP         | AIGN                                  |
| CAUTION: Sec                   | ction 688.32A(6), prohil                                    | EDIATELY CONTACT THE BOARD.  Its the use of information copied from reports and state er than statutory political committees.                                       |                                       |                             |                    |                                       |
| DATE<br>RECEIVED<br>(MM/DD/YR) | PAC ID NUMBER<br>(if applicable)<br>AND PAC CHECK<br>NUMBER | NAME AND ADDRESS OF CONTRIBUTOR   | RELATION<br>TO CANDID<br>(If applical | ATE* F                      | AMOUNT<br>RECEIVED | √ IF FOR<br>FUND-<br>RAISER<br>INCOME |
| 10/14/08                       | ID#   | Tom Goeken<br>1155 330th Ave. Everly, Iowa 51338  | friend                                | \$5                         | 0.00               |                                       |
|                                | ID#   |   |                                       |                             |                    | <b>-</b>                              |
| _                              | CK#   |   |                                       |                             |                    |                                       |
|                                | ID#   |   |                                       |                             |                    | <del> </del>                          |
|                                | CK#   |   |                                       |                             |                    |                                       |
|                                | ID#   |   |                                       |                             |                    |                                       |
|                                | CK#   |   |                                       |                             |                    | [ L                                   |
|                                | ID#   |   |                                       |                             |                    |                                       |
|                                | CK#   |   |                                       |                             |                    |                                       |
|                                | ID#   |   |                                       |                             |                    |                                       |
|                                | CK#   |   |                                       |                             | İ                  |                                       |
|                                | ID#   |   |                                       |                             | ·                  |                                       |
|                                | CK#   |   |                                       |                             |                    | L                                     |
|                                | ID#   |   | <del></del>                           |                             |                    |                                       |
|                                | CK#   |   |                                       |                             |                    |                                       |
|                                | ID#   |   |                                       |                             |                    |                                       |
|                                | CK#   |   |                                       |                             |                    |                                       |
| -                              | ID#   |   |                                       |                             |                    |                                       |
|                                | CK#   |   |                                       |                             |                    |                                       |
| _                              |   |   | SUB-TOTAL                             |                             | . 00               |                                       |

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_of\_\_\_\_\_\_(for Schedule A)

TOTAL (if last page of this schedule)

FOR INSTRUCTIONS, SEE BACK OF FORM

| ₹ase |  |  |
|------|--|--|
|      |  |  |
|      |  |  |
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## EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

| SCHEDULE<br><b>B</b><br>(Rev. 07/03) | MONETARY<br>EXPENDITURES |
|--------------------------------------|--------------------------|
| CHEC<br>AME                          | CK THIS BOX IF           |

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Joe Skow

| DATE          | CANDIDATE<br>ID NUMBER  | NAME AND ADDRESS TO WHOM EXPENDITURE | PURPOSE                            | AMOUNT       |
|---------------|-------------------------|--------------------------------------|------------------------------------|--------------|
| (MM/DD/YR)    | (if applicable) AND PAC | (Disbursement) WAS MADE              | (DESCRIBE TRANSACTION)             | EXPENDED     |
| (MINIOD) (TY) | CHECK                   |                                      |                                    |              |
|               | NUMBER<br>ID#           |                                      |                                    |              |
| 08/26/2008    | 10#                     | Speed Printers                       | make copies of letter for handouts |              |
| 012012006     | CK#                     | Spencer, Iowa 51301                  |                                    | s 138.24     |
|               | ID#                     | Spencer, 10Wa 31301                  |                                    | 3            |
| Ì             |                         |                                      |                                    |              |
|               | CK#                     |                                      |                                    | Ì            |
|               | !D#                     |                                      |                                    |              |
|               | CK#                     |                                      |                                    |              |
|               |                         |                                      |                                    |              |
|               | ID#                     |                                      |                                    |              |
|               | CK#                     | ·                                    |                                    |              |
|               | ID#                     |                                      |                                    |              |
|               | CK#                     |                                      |                                    |              |
|               |                         |                                      |                                    |              |
|               | ID#                     |                                      |                                    | <del></del>  |
|               | CK#                     |                                      |                                    |              |
|               | ID#                     |                                      |                                    | _            |
|               | CK#                     |                                      |                                    |              |
|               |                         |                                      |                                    |              |
|               | ID#                     |                                      |                                    | <del> </del> |
| },            | CK#                     |                                      |                                    |              |
|               |                         |                                      |                                    | 1            |

SUB-TOTAL TOTAL (If last page of this schedule)

\$ 138.24

| THIS BOX APPL | IES TO CANDID | ATES' COMMITTEES ON | LY: |
|---------------|---------------|---------------------|-----|
|               |               |                     |     |

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A-402(3)(i)-)

| D    |     | , |  |
|------|-----|---|--|
| Page | A.F | , |  |
|      | or  |   |  |

| FOR INSTRUCTIONS, SEE BACK OF FORM                            |              |              |
|---|--------------|--------------|
|   | SCHEDULE     |              |
| COMMITTEE NAME (Must be same as on Statement of Organization) | D            | INCURRED     |
| Committee to Elect Joe Skow                                   | (Rev. 08/98) | INDEBTEDNESS |

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

|     | _   | _     |       |  |
|-----|-----|-------|-------|--|
| j   |     | 2.2.2 |       |  |
| l'R | ese | st Fa | יוויו |  |
| -   |     | 70-2  | 71.11 |  |

| (Rev. 08/98) | INCURRED<br>INDEBTEDNESS    |
|--------------|-----------------------------|
|              | CK THIS BOX<br>MENDING<br>M |

## **DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD** (DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F)

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice

| DATE                    |  | (188.06  | en received.  |
|-------------------------|--|--|---|
| INCURRED<br>(MM/DD/YR)  | NAME AND ADDRESS OF PERSON<br>TO WHOM DEBT OR OBLIGATION IS OWED | DESCRIPTION OF GOODS OR<br>SERVICES PROVIDED OR<br>PURCHASED | BALANCE OWED AT<br>CLOSE OF<br>REPORTING<br>PERIOD* |
| 10/02/2008              | Joe Skow/ self   | Yard signs   | 514.00  |
|                         |  |  |   |
| ·                       |  |  |   |
|                         |  |  |   |
|                         |  |  |   |
|                         |  |  |   |
|                         |  |  |   |
|                         |  |  |   |
|                         |  | SUB-TOTAL  | \$<br>514.00  |
|                         | TOTAL DEBTS OWED BY COMMITTEE AT TH                              | HE END OF THIS REPORTING PERIOD                              | \$<br>514.00  |
| of potential firming to | malest manual afternoon and a street at the same and             |  |   |

a) figure is unknown, show "estimated" beside the figure.

Page\_ of 1 (for Schedule D)

CANDIDATE COMMITTEES NOTE:

"Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

| MMITTEE NAM  | ME(Must be same as on Statement of Organization)   | RESET   | SCHEDULE                  |
|--|--|---|---------------------------|
| mmittee to E   | lect Joe Skow/ Clay County Supervisor  |   | (Rev. 02/08) REC          |
| TE: This sched                                       | ule reports money loaned to the committee which is deposited in DANS FROM LAST REPORTING PERIOD \$ $2000.00$           | the committee account.  | CHECK THIS E              |
| RTI - MONETA<br>(Original                            | ARY LOANS RECEIVED <u>THIS</u> REPORTING PERIOD source of loan, such as a bank, must be shown if a third party is      | Involved. Include loans from candi  | dale's personal funds.)   |
| DATE<br>RECEIVED<br>(MM/DD/YR)                       | NAME AND ADDRESS OF LENDER<br>(Include Endorser's Name, If Applicable)   | RELATIONSHIP TO CANDIDATE (If Applicable  | AMOUNT OF LOAN            |
| 09/25/2008   | Self/ Joe Skow   | self  | \$ 1500.00                |
|  |  |   |                           |
|  |  |   |                           |
|  |  |   |                           |
| TII - MONET,<br>(Loans fo                            | ARY LOAN REPAYMENTS MADE <u>THIS</u> REPORTING PERIOD<br>Ingiven must be reported on Schedule E In-kind Contributions. | TOTAL (PART I)  | \$ 1500.00                |
| TII - MONET,<br>(Loans for<br>DATE PAID<br>MM/DD/YR) | NAME AND ADDRESS OF LENDER   | RELATIONSHIP TO   |                           |
| DATE PAID  | rgress must be reported on schedule E In-kind Contributions.,  |   | \$ 1500.00  AMOUNT REPAID |
| DATE PAID  | NAME AND ADDRESS OF LENDER   | RELATIONSHIP TO   | AMOUNT REPAID             |
| DATE PAID  | NAME AND ADDRESS OF LENDER   | RELATIONSHIP TO   | AMOUNT REPAID             |
| DATE PAID  | NAME AND ADDRESS OF LENDER   | RELATIONSHIP TO   | AMOUNT REPAID             |
| DATE PAID  | NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)  | RELATIONSHIP TO CANDIDATE* (If Applicable)  | AMOUNT REPAID             |
| DATE PAID  | NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)  | RELATIONSHIP TO CANDIDATE* (If Applicable)  REPAYMENTS (PART II)  AL LOANS FORGIVEN | AMOUNT REPAID             |